

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 889745 RECEIPT DATE: 07 / 20 / 01
IA NUMBER: PCT/ AU00 / 00030 IA FILING DATE: 01 / 20 / 00
FAMILY NAME: PEACH DELAY WAIVED (Y/N): Y
GIVEN NAME: DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 01 / 20 / 99
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: GH-01383 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX
NAME: JAMES RAY & ASSOCIATES
STREET: 2640 PITCAIRN ROAD
CITY: MONROEVILLE
STATE/COUNTRY: PA ZIP: 15146
EMAIL:
APPLICATION TITLES:
ROCK BORING DEVICE

TAB TO LAST POSITION,PUSH SEND